CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT



Date Received RECEIVED COVER RAGE

Please type or print in ink. 2013 MAR 28 PM 4: 45 NAME OF FILER MARYEJ KENNEDY **MADRID** ART 1. Office, Agency, or Court Agency Name CITY OF LA MESA Division, Board, Department, District, if applicable Your Position CITY MAYOR ▶ If filing for multiple positions, list below or on an attachment. Agency: SEE ATTACHED Position: __ 2. Jurisdiction of Office (Check at least one box) ☐ State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County _ County of ___ City of LA MESA Other ___ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2012, through Leaving Office: Date Left _____/____ December 31, 2012. (Check one) -or-O The period covered is January 1, 2012, through the date of The period covered is ______, through leaving office. December 31, 2012. Assuming Office: Date assumed _____/_____ O The period covered is _______ through the date of leaving office. Candidate: Election year ___ and office sought, if different than Part 1: ___ 4. Schedule Summary ► Total number of pages including this cover page: _ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments – schedule attached Schedule D - Income - Gifts - schedule attached ☐ Schedule B - Real Property – schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State

Date Signed <u>03/26/2013</u>

(month, day, year)

Art Madrid City Councilmember City of La Mesa

Form 700 – Expanded Statement for 2012:

| Agency | <u>Position</u> |
|--|--------------------------|
| La Mesa Community Redevelopment Agency | Agency Member |
| La Mesa Public Financing Authority | Authority Member |
| La Mesa Successor Agency | Agency Member |
| Metro Wastewater JPA/Commission | Alternate Representative |
| San Diego Association of Governments | Primary Representative |

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

| CALIFORNIA FORM / () | |
|-------------------------------------|--|
| FAIR POLITICAL PRACTICES COMMISSION | |
| Name | |
| ART MADRID | |
| | |

| NAME OF BUSINESS ENTITY COSTCO WAREHOUSE | ► NAME OF BUSINESS ENTITY |
|--|--|
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| WHOLESALE BUSINESS | |
| FAIR MARKET VALUE | EAID MADKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 | \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other (Describe) | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| AT&T | · · · · · · · · · · · · · · · · · · · |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| PUBLIC UTILITY-COMMUNICATIONS | • |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| 2 \$2,000 - \$10,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other (Describe) | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| QUALCOME CORPORATION | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| INFORMATION TECHNOLOGY | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 | \$2,000 - \$10,000 \$100,000 \$100,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other (Describe) | Stock Othër(Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| Comments: | · |

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| ART MADRID |

| 1. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|---|---|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| AT&T | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 140 NEW MONTOGOMERY ST. S.F. CA | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| COMMUNICATIONS PUBLIC UTILISTY | |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| RETIRED EMPLOYEE | |
| GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$500 - \$1,000 \$1,001 - \$10,000 | \$500 - \$1,000 \$1,001 - \$10,000 |
| ✓ \$10,001 - \$100,000 | S10,001 - \$100,000 OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Salary Spouse's or registered domestic partner's income |
| Loan repayment Partnership | Loan repayment Partnership |
| | |
| Sale of(Real property, car, boat, etc.) | Sale of(Real property, car, boat, etc.) |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| | The man most life, and each assiste or \$10,000 or more |
| | |
| ✓ Other RETIREMENT | Other |
| (Describe) | (Describe) |
| | <u> </u> |
| ► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PEI | |
| | ending institutions, or any indebtedness created as part of a |
| | e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's |
| regular course of business must be disclosed as follow | |
| · · | |
| NAME OF LENDER* | INTEREST RATE TERM (Months/Years) |
| ADDRESS (Business Address Acceptable) | % |
| ADDRESS (Business Address Acceptable) | SECURITY FOR LOAN |
| DISINIESS ACTIVITY IS ANY OF LENDED | □ None □ Personal residence |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | _ resonary sources |
| | Real PropertyStreet address |
| HIGHEST BALANCE DURING REPORTING PERIOD | 3,130, 480,130 |
| \$500 - \$1,000 | City |
| \$1,001 - \$10,000 | Guarantor |
| \$10,001 - \$100,000 | |
| OVER \$100,000 | Other |
| | (Describe) |
| | |
| Comments: | |
| | |

SCHEDULE D Income - Gifts

ART MADRID

| ▶ NAME OF SOURCE (Not an Acronym) | ► NAME OF SOURCE (Not an Acronym) |
|---|---|
| SAN DIEGO REGIONAL AIRPORT AUTHORITY | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 3225 HARBOR DRIVE, SAN DIEGO. CA BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| MANAGE SAN DIEGO REGIONAL AIRPORT | BOSINESS ACTIVITY, II ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 01 , 01 , 12 | |
| \$ 1,500.00 TARKING FERMIT | |
| USED ON CITY | |
| BUSINESS | |
| NAME OF SOURCE (Not an Acronym) | ► NAME OF SOURCE (Not an Acronym) |
| SPROUTS | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 4630 PALM AVENUE | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| FOOD RETAIL STORE | 275 (111) 211 (1 |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 01 , 12 , 13 | |
| / \$LA MESA 100 YEAR | |
| CELEBRATION | <u></u> |
| ▶ NAME OF SOURCE (Not an Acronym) | ► NAME OF SOURCE (Not an Acronym) |
| <u> </u> | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| <u> </u> | \$ |
| | |
| | \$ |
| | |
| Comments | |
| Comments: | |
| | |



SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

| CALIFORNIA FORM FAIR POLITICAL PRACTICES CO | |
|---|--|
| Name | |
| ART MADRID | |

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

| NAME OF SOURCE | ► NAME OF SOURCE |
|---|---|
| LEAGUE OF CALIFORNIA CITIES | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 1400 K STREET | <u>"</u> |
| CITY AND STATE | CITY AND STATE |
| SACRAMENTO, CA | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) |
| ATTENDED VARIOUS LEAGUE BOARD MEETINGS | |
| DATE(S): 1 / 1 / 12 - 12 / 31 / 12 AMT. \$ 1276.18 | DATE(S):// AMT: \$ |
| TYPE OF PAYMENT: (must check one) Gift Income | TYPE OF PAYMENT: (must check one) |
| DESCRIPTION: REIMBURSEMENT TO CITY FOR TRAVEL AND LODGING EXPENSE | DESCRIPTION: |
| | |
| NAME OF SOURCE | ▶ NAME OF SOURCE |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| CITY AND STATE | CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) |
| DATE(S): | DATE(S): |
| TYPE OF PAYMENT: (must check one) Gift Income | TYPE OF PAYMENT: (must check one) Gift Income |
| DESCRIPTION: | DESCRIPTION: |
| | |
| | |
| Comments: | |
| Odininents. | |
| | 5. |